

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 09648164 FILING DATE

APPLICANT(S)

010282 1-1209 CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.			1		4	
TOTAL DEP.			14		23	
TOTAL CLAIMS			15		27	

TOTAL IND.				
TOTAL DEP.				
TOTAL CLAIMS				

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 09/648864 FILING DATE

APPLICANT(S)

7-26-04 3

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	4					
TOTAL DEP.	21	↔	↔	↔		
TOTAL CLAIMS	25	████	████	████	████	████

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		1				
52		1				
53		1				
54		1				
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100						
TOTAL IND.						
TOTAL DEP.		↔	↔	↔		
TOTAL CLAIMS		████	████	████	████	████